

Self-Declaration / Undertaking by Ph.D. Students,NIPER, S A S Nagar

Date:/...../2021

Respected Sir / Madam,

I have gone through **advisory and appeal of the institute** dated 07-05-2021 and understood the guidelines and protocols of the Institute, pertaining to resumption of academic activities and research. I state that I am aware that it is entirely voluntary for me to return to the Institute and that I am doing so of my own free will, having understood the risks and doing laboratory work at the Institute in the current COVID-19 Pandemic.

I had (.....), returned from.....
..... (Mobile number.....) on
...../...../.

In my opinion it is completely essential for me to continue my research/ lab work at NIPER, S A S Nagar Campus and the nature and/or stage of my academic activities and research is such that it cannot be done from home and that any further delay would jeopardize my academic activities and research work.

I declare that:

- I shall strictly follow the guideline of not travelling home town/any other out station visit for 6 months. I shall visit outside locally/out of station (home town/any other visit out station) only in case of medical emergency. The nature of emergency will be substantiated by my supervisor/HoD.
- I shall strictly follow the guidelines issued by NIPER in case of out station visits. I shall submit COVID-19 negative test report (RT-PCR)not older than 72 hours done at home town upon my arrival at NIPER-SAS Nagar. Also as per notified guidelines I shall undergo COVID-19 (RT- PCR) test before completion of my quarantine period of 7 days. I shall bear the cost of the test.
- I am not having fever, cough and breathing problem (from last 2 weeks).
- I am not having any disease like diabetes, hypertension or heart/ lung /kidney related disease, etc.
- I will wear proper face mask as well as any other prescribed protective gear. I will sanitize my hands regularly and maintain physical/social distancing in my class room/ Laboratories/ academic area/ hostels and in NIPER, S A S Nagar campus and strictly follow covid appropriate behaviour all the time.
- I will use AarogyaSetu and Cova Apps on my mobile and they will remain active at all times (through Bluetooth and Wi-Fi)
- I will self-monitor my health every day after I return to the Institute. In case, I develop fever, cough, flu-like symptoms and/or breathing problem then I

will inform about it to my supervisor / in charge/ Head of department etc. Also I will consult a doctor and follow medical advice.

- I understand that there is always a possibility of getting infected by the virus. My parents/ guardians are also fully aware of my wish to continue my research work at the institute during the second wave of covid pandemic.
- I shall not engage in any sports activities, gatherings, arrange any sort of short parties (including birthday etc.). I found violating any of the guidelines above I shall be liable to be acted upon as per the approved covid-19 guidelines of NIPER-SAS Nagar.
- I also want to declare that my supervisor has not put any pressure on me to resume the academic and research activities at NIPER, S A S Nagar.
- I also understand that NIPER, S A S Nagar has very limited medical facilities with doctor available for limited time on selected days only. However in case of COVID-19 infection I may require isolation, treatment and/or hospitalization outside the campus, for which I will follow Government laid down protocols and bear all the expenses of treatment. In no way NIPER SAS Nagar will be held responsible, if I develop COVID-19 infection or any complication associated with the COVID infection during my stay at the institute.
- Registration Number: _____

Signature of the student:

Emergency contact 1:
(Relation with student)
Address & Mobile Number

Emergency Contact 2 :
(Relation with student)
Address & Mobile Number

- Signature of Parents :

I agree with the above request made by the student that the nature and/or stage of the academic activities and research being conducted by him/her is such that it cannot be subjected to any further delay, nor can it be done from home. I affirm that I have not exerted any pressure in making the student decide to stay in the Institute. I shall be responsible for all the activities of the said student during his stay at the institute in the ongoing pandemic. I shall coordinate the wellbeing of the student with the help of available Institute facilities in case of any COVID-19 related emergency.

Name(s) and signature of the Research Supervisor(s) / P.I (s)	Name and Signature of the Head of the Department